Foster Family Home - Corrective Action Report

Provider ID:

1-561391

Home Name:

Susan Intong, CNA

Review ID:

1-561391-7

91-750 Oneula Place

Reviewer:

Lisa Johnson

Ewa Beach

HI

96706

Begin Date:

5/17/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) Home inspection for a 3 person CCFFH recertification made on 5/17/19. Home is in compliance with all requirements.

Compliance Manager

Primary Care Giver

Date

5/17/2019

Date